

Fill in this information to identify the case:

Debtor WonderWork, Inc.
United States Bankruptcy Court for the: Southern District District of NY
(State)
Case number 16-13607 (MKV)
(if known)

☐ Check if this is an
amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☒ No. Go to Part 2.
☐ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address	As of the petition filing date, the claim is: \$ _____	\$ _____
	<i>Check all that apply.</i>	
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
Date or dates debt was incurred	Basis for the claim: _____	
Last 4 digits of account number	Is the claim subject to offset?	
	<input type="checkbox"/> No	
	<input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)		

2.2 Priority creditor's name and mailing address	As of the petition filing date, the claim is: \$ _____	\$ _____
	<i>Check all that apply.</i>	
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
Date or dates debt was incurred	Basis for the claim: _____	
Last 4 digits of account number	Is the claim subject to offset?	
	<input type="checkbox"/> No	
	<input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)		

2.3 Priority creditor's name and mailing address	As of the petition filing date, the claim is: \$ _____	\$ _____
	<i>Check all that apply.</i>	
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
Date or dates debt was incurred	Basis for the claim: _____	
Last 4 digits of account number	Is the claim subject to offset?	
	<input type="checkbox"/> No	
	<input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)		

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Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1	Nonpriority creditor's name and mailing address <u>Action Mailers</u> <u>90 Commerce Drive</u> <u>Aston, PA 19014</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>18,839.14</u>
	Date or dates debt was incurred <u>Aug. 2016</u> Last 4 digits of account number _____	Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Nonpriority creditor's name and mailing address <u>Bill & Ann Ziff Foundation</u> <u>350 Park Avenue, 4th Floor</u> <u>New York, NY 10022</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>845,500.00</u>
	Date or dates debt was incurred <u>May 2014</u> Last 4 digits of account number _____	Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3	Nonpriority creditor's name and mailing address <u>Brian Mullaney</u> <u>1 Sumner Lane</u> <u>Belmont, MA 02478</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>641,320.07</u>
	Date or dates debt was incurred <u>2016</u> Last 4 digits of account number _____	Basis for the claim: <u>2016 Salary/Unreimbursed expenses</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.4	Nonpriority creditor's name and mailing address <u>CDR Fundraising Group</u> <u>16900 Science Drive, Suite 210</u> <u>Bowie, MD 20715</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>48,750.00</u>
	Date or dates debt was incurred <u>Oct. 2016</u> Last 4 digits of account number _____	Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.5	Nonpriority creditor's name and mailing address <u>CENVEO</u> <u>Commercial Env. Products</u> <u>PO Box 802035, Chicago, IL 60680-2035</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>4,949.13</u>
	Date or dates debt was incurred <u>Oct. 2016</u> Last 4 digits of account number _____	Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.6	Nonpriority creditor's name and mailing address <u>Color Tree Group</u> <u>8000 Villa Park Drive</u> <u>Henrico, VA 23228-6500</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>21,719.22</u>
	Date or dates debt was incurred <u>Sept. 2016</u> Last 4 digits of account number _____	Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

<u>3.</u> Nonpriority creditor's name and mailing address <u>Communications Corporation of America</u> <u>13195 Freedom Way</u> <u>Boston, VA 22713</u> Date or dates debt was incurred <u>Nov. 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ 6305.63</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
<u>3.</u> Nonpriority creditor's name and mailing address <u>Copilevitz & Canter, LLC</u> <u>310 West 20th St., Suite 300</u> <u>Kansas City, MO 64108</u> Date or dates debt was incurred <u>Dec. 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ 1140.93</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
<u>3.</u> Nonpriority creditor's name and mailing address <u>Corporate Press, Inc.</u> <u>9700 Philadelphia Court</u> <u>Lanham, MD 20706</u> Date or dates debt was incurred <u>Nov. 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ 7,078.69</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
<u>3.</u> Nonpriority creditor's name and mailing address <u>Detter Family Foundation</u> <u>11519 Aerie Lane</u> <u>Naples, FL 34120</u> Date or dates debt was incurred <u>Aug. 2013</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ 106,833.33</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
<u>3.</u> Nonpriority creditor's name and mailing address <u>Development Resources, Inc.</u> <u>1820 N. Fort Meyer Drive, Suite 702</u> <u>Arlington, VA 22209</u> Date or dates debt was incurred <u>Nov. 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ 10,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes

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Amount of claim

<u>3.</u> Nonpriority creditor's name and mailing address <u>Direct Mail Processors, Inc.</u> <u>1150 Conrad Ct.</u> <u>Hagerstown, MD 21740</u> Date or dates debt was incurred <u>Sept. 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ 11,200.96</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
<u>3.</u> Nonpriority creditor's name and mailing address <u>DMI Data Management, Inc.</u> <u>PO Box 846</u> <u>Stoneville, NC 27048</u> Date or dates debt was incurred <u>Dec. 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ 4997.49</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
<u>3.</u> Nonpriority creditor's name and mailing address <u>Hana Fuchs</u> <u>60 Riverside Drive, Apt. 7F</u> <u>New York, NY 10024</u> Date or dates debt was incurred <u>2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ 8881.02</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unreimbursed expenses</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
<u>3.</u> Nonpriority creditor's name and mailing address <u>HelpMeSee, Inc.</u> <u>20 West 36th St., Fl. 4</u> <u>New York, NY 10018</u> Date or dates debt was incurred <u>2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ 16,059,833.50</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<u>3.</u> Nonpriority creditor's name and mailing address <u>IDMI</u> <u>490 White Pond Drive</u> <u>Akron, OH 44320</u> Date or dates debt was incurred <u>Oct. 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$ 1628.52</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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Amount of claim

3.	Nonpriority creditor's name and mailing address <u>Joseph Mullaney</u> <u>512 River Road</u> <u>Westport, MA 02790</u> Date or dates debt was incurred <u>Aug. 2013</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <u>\$ 110,750.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.	Nonpriority creditor's name and mailing address <u>Kaplan Kravet & Vogel P.C.</u> <u>630 Third Avenue, 5th Floor</u> <u>New York, NY 10017</u> Date or dates debt was incurred <u>Dec. 2016</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <u>\$ 8259.03</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.	Nonpriority creditor's name and mailing address <u>Koala Design</u> <u>Attn: Mike Schell 1606 NE 1st St.</u> <u>Fort Lauderdale, FL 33301</u> Date or dates debt was incurred <u>Dec. 2016</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <u>\$ 8,500.00</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.	Nonpriority creditor's name and mailing address <u>L&E Meridian</u> <u>8000 Corporate Court</u> <u>Springfield, VA 22153</u> Date or dates debt was incurred <u>Oct. 2016</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <u>\$ 1359.48</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.	Nonpriority creditor's name and mailing address <u>Log-On</u> <u>520 Eighth Avenue, 14 Fl.</u> <u>New York, NY 10018</u> Date or dates debt was incurred <u>Sept. 2016</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <u>\$ 48,538.28</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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Amount of claim

3.	Nonpriority creditor's name and mailing address <u>MDI Imaging and Mail</u> <u>21955 Cascades Parkway</u> <u>Sterling, VA 20166</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>4657.64</u>
	Date or dates debt was incurred <u>Oct. 2016</u> Last 4 digits of account number <u> </u>	Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Meadowlark Foundation</u> <u>PO Box 860</u> <u>Saratoga Springs, NY 12866</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>524,833.33</u>
	Date or dates debt was incurred <u>Jan. 2014</u> Last 4 digits of account number <u> </u>	Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Nestle Pure Life Direct</u> <u>PO Box 856192</u> <u>Louisville, KY 40285</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>22.33</u>
	Date or dates debt was incurred <u>Dec. 2016</u> Last 4 digits of account number <u> </u>	Basis for the claim: <u>Office supplies</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Nextiva</u> <u>8800 E Chaparral Rd. Ste 300</u> <u>Scottsdale, AZ 85250</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>527.56</u>
	Date or dates debt was incurred <u>Nov. 2016</u> Last 4 digits of account number <u> </u>	Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Nonpriority creditor's name and mailing address <u>Resource One</u> <u>2900 E. Apache</u> <u>Tulsa, OK 74116</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>2165.80</u>
	Date or dates debt was incurred <u>Nov. 2016</u> Last 4 digits of account number <u> </u>	Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

<u>3.</u> Nonpriority creditor's name and mailing address <u>Skyline Credit Ride, Inc.</u> <u>52-29 35th St.</u> <u>Long Island City, NY 11101</u> Date or dates debt was incurred <u>2016</u> Last 4 digits of account number <u> </u>	<p>As of the petition filing date, the claim is: <u>\$ 43.05</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed</p> <p>Basis for the claim: <u>Services rendered</u></p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
<u>3.</u> Nonpriority creditor's name and mailing address <u>The Holewinski Group</u> <u>253 Rainbow Drive #15398</u> <u>Livingston, TX 77399</u> Date or dates debt was incurred <u>Nov. 2016</u> Last 4 digits of account number <u> </u>	<p>As of the petition filing date, the claim is: <u>\$ 120.00</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services rendered</u></p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
<u>3.</u> Nonpriority creditor's name and mailing address <u>The Raphael & Diana Vinoly Foundation</u> <u>350 Fifth Avenue, 41 Fl.</u> <u>New York, NY 10118</u> Date or dates debt was incurred <u>Sept. 2013</u> Last 4 digits of account number <u> </u>	<p>As of the petition filing date, the claim is: <u>\$ 60,083.33</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Loan</u></p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
<u>3.</u> Nonpriority creditor's name and mailing address <u>Thompson Family Foundation</u> <u>c/o Kevin Maclay</u> <u>One Thomas Circle, NW, Ste. 1100, Washington, DC 20005</u> Date or dates debt was incurred <u>May 2013</u> Last 4 digits of account number <u> </u>	<p>As of the petition filing date, the claim is: <u>\$ 7,979,166.67</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Loan</u></p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
<u>3.</u> Nonpriority creditor's name and mailing address <u>Tri-State Envelope Corp.</u> <u>1 West 34 St., Suite 704</u> <u>New York NY 10001</u> Date or dates debt was incurred <u>Nov. 2016</u> Last 4 digits of account number <u> </u>	<p>As of the petition filing date, the claim is: <u>\$ 2841.32</u> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Services rendered</u></p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Amount of claim

<u>3.</u> Nonpriority creditor's name and mailing address <u>Union ID and Mail</u> <u>8516 Rainswood Drive</u> <u>Landover, MD 20785</u> Date or dates debt was incurred <u>Nov. 2016</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>3171.06</u>
<u>3.</u> Nonpriority creditor's name and mailing address <u>Valtim Marketing Solutions</u> <u>PO Box 809</u> <u>Forest, VA 24551</u> Date or dates debt was incurred <u>Oct. 2016</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>1967.73</u>
<u>3.</u> Nonpriority creditor's name and mailing address <u>Wells Fargo Financial Leasing</u> <u>800 Walnut St., MAC N0005-055</u> <u>Des Moines, IA 50309</u> Date or dates debt was incurred <u>Dec. 2013</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Copier Lease</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>452.50</u>
<u>3.</u> Nonpriority creditor's name and mailing address <u>XPO Logistics</u> <u>PO Box 2693</u> <u>New York, NY 10108</u> Date or dates debt was incurred <u>Nov. 2016</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>76.32</u>
<u>3.</u> Nonpriority creditor's name and mailing address Date or dates debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u> </u> Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u> </u>

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Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1

5a. \$ 0

5b. Total claims from Part 2

5b. + \$ 26,556,513.06

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

5c. \$ 26,556,513.06